PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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(703) 746-4000 or Fax

			A.E.S. (700) 1000				
INSTRUCTIONS: This for appropriate. All further conindicated unless corrected b maintenance fee notification	respondence including the I selow or directed otherwise	smitting the ISSUE FEE and Patent, advance orders and no in Block 1, by (a) specifying	PUBLICATION FEE (if requirements of maintenance fees a new correspondence address	aired). Blocks I through 4 swill be mailed to the current; and/or (b) indicating a sep	hould be completed where correspondence address as arate "FEE ADDRESS" for		
		with any corrections or use Block 1)	Fee(s) Transmittal, Ti	f mailing can only be used finis certificate cannot be used all paper, such as an assignment	for any other accompanying		
	90 10/20/2003	195	have its own certificat	e of mailing or transmission.	or round did wing, man		
TOWNSEND AN TWO EMBARCAI 8TH FLOOR SAN FRANCISCO	CA 04111 3834	1 7 700 W	I hereby certify that t States Postal Service addressed to the Ma	rtificate of Mailing or Transhis Fee(s) Transmittal is bein with sufficient postage for fit il Stop ISSUE FEE address PTO, on the date indicated be	g deposited with the United st class mail in an envelope above, or being facsimile		
SAN FRANCISCO	, CA 94111-3034	, KIDA / LOS	Konnie La		(Depositor's name)		
	Y		Cosumie C	Kiran	(Signatore)		
		TRADFIRETE	YLMI. 13,	2003	(Date)		
APPLICATION NO.	FILING DATE		ET) INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/062,431	01/30/2002	James L	Winkler	018547-035530US 3558			
TITLE OF INVENTION: DI	EVICE AND METHODS F	OR MIXING FLUIDS					
					,		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION PEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1330	\$300	\$1630	01/20/2004		
EXAM	INER	ART UNIT	CLASS-SUBCLASS]			
SORKIN,	DAVID L	1723	366-144000	-	·		
1. Change of correspondence	address or indication of "Fe	ee Address" (37 2. For pr	inting on the patent front page,				
CFR 1.363). © Change of corresponde	nce address (or Change of C	Correspondence agents O	t up to 3 registered patent a R, alternatively, (2) the name	of a single	send and Townsend		
Address form PTO/SB/12	(2) attached.	agent) ar	ving as a member a registered and the names of up to 2 regist		Crew LLP		
	on (or "Fee Address" Indicat or more recent) attached. Use		or agents. If no name is liste rinted.	d, no name 3			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON THE PATEN	fT (print or type)				
been previously submitted	d to the USPIO or is being s	ubmitted under separate cover.	ear on the patent. Inclusion of a Completion of this form is NO	I a substitute for filing an ass	ate when an assignment has ignment.		
(A) NAME OF ASSIGNE			CE: (CITY and STATE OR CO	ŕ			
Affymetrix, I	nc.	Santa C	Clara, California		•		
Please check the appropriate	assignee category or categor	ries (will not be printed on the	patent); 🗓 individual 🕸	corporation or other private gr	roup entity		
4a. The following fee(s) are	enclosed:	4b. Payment o	f Fee(s):				
MCssue Fee		A check	in the amount of the fee(s) is en	closed.			
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☐ Advance Order - # of (Copies	XVI The Direction Deposit Action	ector is hereby authorized by cocount Number 20-1430	harge the required fee(s), or(enclose an extra c	credit any overpayment, to opy of this form).		
Director for Patents is reques	ied to apply the Issue tee ar	nd Publication Fee (if any) or to	o re-apply any previously paid i	ssue fee to the application ide	ntified above.		
(Authorized Signature)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(Date)	4 4 1/2 5 12	<u> </u>			
Darin J. Gib	by k	eg. No. 38,464	11/20/2003	HDAHTE2 00000080 201	430 10062431		
NOTE: The Issue Fee and other than the applicant:	Publication Fee (if require registered attorney or age	ed) will not be accepted from ent; or the assignee or other tent and Trademark Office	anyone 01 FC:1501 party in 02 FC:1504	1330.00 ba	•		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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TRANSMITTAL			Application Number		10/062,431		
			Filing Date		January 30, 2002		
FORM			First Named Inventor		Winkler, James L.		
(to be used for all corresp	ondence after ini	itial filing)	Art Unit		1723		
			Examiner Name		David L. Sorkin		
Total Number of Pages in Submission	This		Attorne	ey Docket Number	018547-035530US		
-		ENCI	OSURE	S (Check all that appl	y)		
Fee Transmittal Form		☐ Drawin	awing(s)		After A	Allowance Communication to Group	
Fee Attached		Licensi	ng-relate	d Papers	Appeal Communication to Board of Appeals and Interferences		
☐ Amendment/Reply		Petition	n		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
After Final			n to Conv		Proprietary Information		
Affidavits/declara	ation(s)	Power of Attorney, Revocation Change of Correspondence Address			Status Letter		
Extension of Time Request		Terminal Disclaimer		Other Enclosure(s) (please identify below):			
Express Abandonment Request		Request for Refund CD, Number of CD(s)		Return Postcard Issue Fee Transmittal			
Information Disclosure	e Statement		.,				
Certified Copy of Priority Document(s)		Remai	rks	The Commissioner is authorized to charge any additional fees to Dep Account 20-1430.			
Response to Missing Incomplete Applicatio							
Response to Missing Parts under 37 CFR 1.52 or 1.53							
-	SIGN	ATURE O	F APPL	ICANT, ATTORNEY,	OR AGEN	Т	
Firm To	wnsend and To	wnsend a	nd Crew	LLP			
or Individual Da	rin J. Gibby	\mathcal{N}		Reg. N	o. 38,464		
Signature			-	·			
Date No	Date November 13, 2003						
		CERTIFIC	ATE OF	TRANSMISSION/M	AILING		
I hereby certify that this corresp as first class mail in an envelope	ondence is being fa	csimile trans	mitted to the	he USPTO or deposited wit	h the United St	tates Postal Service with sufficient postage 50 on the date shown below.	
Typed or printed name Connie Larson							
Signature Coopuin		Kun	Date November 13, 2003			November 13, 2003	

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

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OTAL AMOUNT OF PAYMENT	(\$)	1630

Complete if Known				
Application Number	10/062,431			
Filing Date	January 30, 2002			
First Named Inventor	Winkler, James L.			
Examiner Name	David L. Sorkin			
Art Unit	1723			
Attorney Docket No	018547-035530US			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)						
Check Credit Card Money Order Other None	3. ADI	DITIONAL	FEES				
Deposit Account:	Large	Entity	Small	Entity			
Deposit	Fee	Fee	Fee	Fee	Fee Do	escription	Fee
Account 20-1430	Code	(\$)	Code	(\$)		•	Paid
Number	1051 1052	130 50	2051 2052	65 25	Surcharge - late f	-	
Deposit					or cover sheet.	provisional filing fee	
Account Townsend and Townsend and Crew LLP	1053	130	1053	130	Non-English spec		
Name	1812	2,520	1812	2,520	-	st for reexamination	
The Director is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments	1804	920*	1804	920*	Requesting public Examiner action	cation of SIR prior to	j
Charge any additional fee(s) or any underpayment of fee(s)	1805	1,840*	1805	1,840*	Requesting public Examiner action	cation of SIR after	
Charge fee(s) indicated below, except for the filing fee	1251	110	2251	55		y within first month	
to the above-identified deposit account.	1252	420	2252	210	Extension for repl		
FEE CALCULATION					month	•	
1. BASIC FILING FEE	1253	950	2253	475	Extension for repl	y within third month	
Large Entity Small Entity	1254	1,480	2254	740	Extension for repl month	y within fourth	
Fee Fee Fee Fee Description Fee Paid	1255	2,010	2255	1,005	Extension for repl	y within fifth month	
Code (\$) Code (\$)	1401	330	2401	165	Notice of Appeal		
1001 770 2001 385 Utility filing fee 1002 340 2002 170 Design filing fee	1402	330	2402	165	Filing a brief in su	pport of an appeal	
	1403	290	2403	145	Request for oral h	nearing	
1003 530 2003 265 Plant filing fee 1004 770 2004 385 Reissue filing fee	1451	1,510	1451	1,510	Petition to institute proceeding	e a public use	
1005 160 2005 80 Provisional filing fee	1452	110	2452	55	Petition to revive	- unavoidable	
CURTOTAL (4)	1453	1,330	2453	655	Petition to revive -	- unintentional	
SUBTOTAL (1)	1501	1,330	2501	655	Utility issue fee (o	r reissue)	1330
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1502	480	2502	240	Design issue fee		
Fee from	1503	640	2503	320	Plant issue fee		
Extra Claims below Fee Paid	1460	130	1460	130	Petitions to the Co	ommissioner	
Total Claims -** = X	1807	50	1807	50	Petitions related to applications	o provisional	
Independent = X =	1806	180	1806	180	Submission of Info Stmt	ormation Disclosure	
Multiple Dependent	8021	40	8021	40	Recording each p		
Large Entity Small Entity	1809	770	2809	385	properties) Filing a submission	on after final rejection	
Fee Fee Fee Fee Fee Description			j		(37 CFR § 1.129(
Code (\$) Code (\$)	1810	770	2810	385	For each additional examined (37 CF)		
1201 86 2201 43 Independent claims in excess of 3	1801	770	2801	385	•	nued Examination	
1203 290 2203 145 Multiple dependent claim, if not paid	1802	900	1802	900	Request for exped	dited examination	$\vdash \vdash \vdash \mid$
1204 86 2204 43 ** Reissue independent claims over original patent					of a design applic		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	Other fe	e (specify	/)		Publication Fee-	<u> </u>	300
SUBTOTAL (2) (\$)	*Reduc	ed by Ras	ic Filina	Fee Pai	d SUBTOTAL (3	(\$)1630	
**or number previously paid, if greater; For Beissues, see above	1	,	y			"	
SUBMITTED BY					Com	plete (if applicable)	
Name (Print/Type) Carin J. Gibby Registration No. (Attor	ney/Agent,	38	,464		Telephone	303-571-4000	
Signature					Date	November 13, 2003	